CPR-SS 05-01

CANDIDATE'S REPORT OF RECEIPTS AND DISBURSEMENTS



| Name of Candidate Gray Tolli | ison | - Control - Cont | | Secretary of |
|---|--|--|---|--|
| Address PO Box 1358 | | County | | |
| Telephone 662-234-7070 Contact Name | | (Fax) | 662-234-7095 gray@tollisonlaw.com | |
| | | Email Address | | |
| Office Sought District 09 | weeken and the second | Political Par | | |
| Check here if above is d | ifferent from previou | s report | | |
| | TYPE | OF REPORT | | |
| Annual | Report (Ja | inuary 1, 2008 throu | igh December 31, 2 | (008) Mandatory |
| | 1 | MPORTANT | | |
|) Periodic reports are mandatory, eve indicating "0" (Zero) for total amoun | | | | late shall submit a report |
| Until a candidate files a termination (b)(ii)and(iii). | report, annual and periodi | ic reports must still be file | ed in accordance with Mis | s. Code Ann. \$23-15-807 |
| The appropriate office must be in act or a holiday, the office must be in act reports are acceptable. | tual receipt of the required tual receipt of the require | d reports by 5:00 p.m. on d reports by 5:00 p.m. on | the reporting day. If the o the first working day befo | deadline falls on a weekend ore the deadline. Faxed |
| Contributions in excess of \$200 recei FAX or otherwise within 48 hours of | | | | |
| REPC | RTED CONTRIBU | TIONS AND DISB | URSEMENTS | |
| | Itemized + | Non - Itemized | This Period + | Calendar year-to-date |
| Total amount of contributions | \$4,700.00 + | \$0.00 | \$4,700.00 | \$4,700.00 |
| Total amount of disbursements | \$344.35 + | \$266.00 | \$610.35 | \$610.35 |
| То | tal amount of cash | on hand | \$10,101.73 | 7 |
| I certify that I have examined | this report and to the be | st of my knowledge and b | pelief it is true, accurate, a | and complete. |
| Electronic Signa | ture on file with Mi | ississippi SOS Offic | e | nn - 1990 pen 180 (180 (186 (196 (196 (196 (196 (196 (196 (196 (19 |
| | | | | |

Authority: Refer to Miss.Code Ann. \$23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadline, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann.\$\$23-15-811 and 813(1972).

(Date)

SEND TO: 1. Candidates for statewide, state district, multi-county and all legislative offices should return form to

DELBERT HOSEMANN, Secretary of State, 401 Mississippi Street, Jackson, MS 39201 or FAX to 601-359-1499

(Signature of Candidate)

2. Candidates for countywide or county district offices should return form to their county Circuit Clerk.

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OFFICE USE ONLY

DATE STAMP

Receipt Detail

| Contributor | Туре | Source | Date | Amount |
|--------------------------------------|----------|-------------|------------|------------|
| MD Pac Craig Martin, DMD | Monetary | PAC | 09/17/2008 | \$400.00 |
| AT & T Mississippi PAC | Monetary | Corporation | 09/30/2008 | \$200.00 |
| Wyeth Pharmaceuticals | Monetary | Corporation | 11/06/2008 | \$500.00 |
| Anheuser-Busch, Cos., Inc. | Monetary | Corporation | 11/18/2008 | \$500.00 |
| Commonwealth Brands, Inc. | Monetary | Corporation | 11/18/2008 | \$1,000.00 |
| Entertainment Software Assn. | Monetary | Corporation | 11/18/2008 | \$1,000.00 |
| AT & T Mississippi PAC | Monetary | Corporation | 12/02/2008 | \$300.00 |
| Check into Cash of Mississippi, Inc. | Monetary | Corporation | 12/09/2008 | \$500.00 |
| Comcast | Monetary | Corporation | 12/11/2008 | \$300.00 |

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Disbursement Detail

| Receipient | Purpose | Date | Amount |
|-------------------------------|--|------------|----------|
| Gray Tollison | reimbursement for trip - Democratic mtg. | 06/25/2008 | \$344.35 |
| Disbursement-Non- Itemized | | 12/31/2008 | \$266.00 |